

**APPLICATION DATA SHEET****Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification:: 424/85.1  
Suggested Group Art Unit:: 1646  
CD-Rom or CD-R?:: No  
Sequence Submission:: CD  
Computer Readable Form:: Yes  
Number of Copies of CRF:: 1  
Title:: Tissue Protective Cytokines for the Protection,  
Restoration, and Enhancement of Responsive  
Cells, Tissues and Organs  
Attorney Docket Number:: KW00-2B02-US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 29  
Small Entity:: No  
Petition Included?:: No  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship:: US  
Country:: US  
Status:: Full Capacity

Given Name:: Michael

Middle Name::  
Family Name:: Brines  
Name Suffix::  
City of Residence:: Woodbridge  
State or Providence of Residence:: CT  
Country of Residence:: US  
Street of Mailing Address:: 1 Wepawaug Road  
City of Mailing Address:: Woodbridge  
State or Providence of Mailing Address:: CT  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 06525

Applicant Authority Type:: Inventor  
Primary Citizenship:: US  
Country:: US  
Status:: Full Capacity

Given Name:: Anthony  
Middle Name::  
Family Name:: Cerami  
Name Suffix::  
City of Residence:: Somers  
State or Providence of Residence:: NY  
Country of Residence:: US  
Street of Mailing Address:: 58A Heritage Hill Road  
City of Mailing Address:: Somers  
State or Providence of Mailing Address:: NY  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 10589

Applicant Authority Type:: Inventor  
Primary Citizenship:: US  
Country:: US  
Status:: Full Capacity

Given Name:: Carla  
Middle Name::  
Family Name:: Cerami  
Name Suffix::  
City of Residence:: Sleepy Hollow  
State or Providence of Residence:: NY  
Country of Residence:: US  
Street of Mailing Address:: 121 Farrington Avenue  
City of Mailing Address:: Sleepy Hollow  
State or Providence of Mailing Address:: NY  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 10591

### **Correspondence Information**

Correspondence Customer

Number::

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### Representative Information

Representative Designation::	Registration Number::	Representative Name::
Primary	42,623	Frederick J. Hamble
Associate	44,414	Michael Yamin

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US03/21350	07/03/2003
PCT/US03/21350	Continuation-in-part of	10/188,905	07/03/2002